Vendor's Offer

"Return this Section with your Response"

It is REQUIRED that Bidder COMPLETE, SIGN and SUBMIT the original of this form to the City Procurement Office with the bid response offer. An unsigned "Vendor's Offer", late bid response and/or a materially incomplete response will be considered nonresponsive and rejected.

Bidder is to type or legibly write in ink all information required below.

Company Name: SPECIALTY CARTRIDGE, IN	VC
Company Purchase Order Mailing Address:	
Street Address: 7129 WHEAT STREET NE	
City, State, Zip: COVINGTON, GA. 30014	
Contact Person: JASON KOON	Phone Number: 770-788-5200
E-mail Address: <u>jkoon@atlantaarms.com</u>	Cell Number:
Remit To Information Company Name (as it appears on invoice): SPECIALTY CARTRIDGE, INC.	
Company Payment Remit To Address:	
Street Address: 7129 Wheat Street NE	
City, State, Zip: Covington, GA. 30014	
Company Tax Information If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.: Payment Options Will your company accept the City's Master Card for payment? Yes X No	
Will your company accept Payment via ACH (Automa	
THIS BID IS OFFERED BY	
REQUIRED SIGNATURE OF AUTHORIZED OFFEROR (MUST SIGN IN INK) By signing this offer, Bidder acknowledges acceptance of all terms and conditions contained herein and that prices offered were independently developed without consultation with any other bidder or potential bidder. Failure to sign and return this form with bid response will be considered nonresponsive and rejected.	
Signature of Authorized Offeror	Q-27-16
Jason Koon	Date CEO
Print or Type Name of Authorized Individual Form 201-B (RFP)	Title of Authorized Individual